| | | - 1 | | | | | | | |
|--|--|--|------------------|---|---|--|--|--|--|
| | _ | PART B - FEE(S) TRANSMIT TAL | | | | | | | |
| • | Complete and sent this form, together with applicable for | | | fee(s), to: | • | Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 | | | |
| | INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All further course ondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for | | | | | | | | |
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| Λ C /: | VOLPE AND K UNITED PLAZA 30 SOUTH 17TH PHILADELPHIA 14/2005 PPOLITEZ 00000 | OENIG, P.C. , SUITE 1600 STREET | | | | Ce I hereby certify that the States Postal Service addressed to the Matransmitted to the USI | rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for fir I Stop ISSUE FEE address TO (703) 746-4000, on the control of th | g deposited with the United st class mail in an envelope above, or being facsimile | |
| | | | | | | Randolph J. Huis | | (Depositor's name) | |
| 01 | FC:2501 FC:1504 | C:2501 700.00 GP C:1504 300.00 GP | | | | fll | 14- | (Signature) | |
| | FC:8001 | 30.00 OP | | | | | 0/9/2005 | (Date) | |
| | APPLICATION NO. | FILING DATE | FIRST NAMED INVE | | ED INVEN | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| | 10/618,110 | 07/11/2003 | | Herma | nn Sutter | | SMB-PT081 (P 03 269 M US) | 4098 | |
| | APPLN. TYPE | SMALL ENTITY | ISSUE F | EE | PU | IBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| | nonprovisional | YES | \$700 | | | \$300 | \$1000 | 08/08/2005 | |
| | EXAM | MINER | · ART UN | ır | CL | ASS-SUBCLASS | | | |
| | VRETTAK | OS, PETER J | 3739 | · · · · · · · · · · · · · · · · · · · | • | 606-041000 | | | |
| | CFR 1.363). Change of corresponded response o | dence address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indication or more recent) attached. Use | Correspondence | (1) the na or agents (2) the na registered 2 registered | ames of u OR, alter ame of a s I attorney ed patent | he patent front page, li p to 3 registered pater natively, ingle firm (having as a or agent) and the nam attorneys or agents. If I be printed. | t attorneys 1 VOLDE | and Koenig, P | |
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| | PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | | |
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| Su | tter Medizintechnik GmbH Freiburg, Germany | | | | | | | | |
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| | Artin | | | A check in the amount of the fee(s) is enclosed. | | | | | |
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34,626 Randolph J. Huis Typed or printed name Registration No. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Approved for use through 07/31/2006. U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ct of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number on 12/08/2004. Complete if Known to the Consequed Appropriations Act, 2005 (H.R. 4818). 10/618,110 **Application Number** NSMI July 11, 2003 Filing Date For FY 2005 Hermann Sutter First Named Inventor Peter J. Vrettakos **Examiner Name** X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3739 TOTAL AMOUNT OF PAYMENT (\$) 1,030.00SMB-PT081 (P 03 269 M US) Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): 22-0493 Deposit Account Name: Volpe and Koenig, P.C. Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION**

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| | FILING F Sr | EES nall En tity | SEARC | H FEES Small Entity | | TION FEES | |
|-------------------------|----------------|----------------------------|----------|------------------------|----------|-----------|----------------|
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| | | | | | | | 0 11 15 414 |

2. EXCESS CLAIM FEES **Small Entity** Fee (\$)

Fee Description Fee (\$) 50 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | <u>Multiple Deper</u> | ident Claims |
|-----------------------|--------------------------------|-----------------|---------------|-----------------------|---------------|
| - | = x | | <u> </u> | <u>Fee (\$)</u> | Fee Paid (\$) |
| HP = highest number o | f total claims paid for, if gr | eater than 20 | | | 0.00 |
| Indep. Claims | Extra Claims | <u>Fee (\$)</u> | Fee Paid (\$) | | |

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Number of each additional 50 or fraction thereof Extra Sheets Fee Paid (\$) Total Sheets 0.00 _____ (round up to a whole number) x - 100 = / 50 = Fees Paid (\$) 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Other: Small Entity Issue Fee, Publication Fee and Advance Soft Copies

1,030.00

| SUBMITTED BY | $U_A U_A$ | | | |
|-------------------|------------------|--|------------------------|--|
| Signature | puy | Registration No. 34,626 (Attorney/Agent) | Telephone 215-568-6400 | |
| Name (Print/Type) | Randolph J. Huis | | Date 6/9/2005 | |

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PTO/SB/21 (09-04)

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|---|--|---|
| | Application Number | 10/618,110 |
| RANSMITTAL | Filing Date | July 11, 2003 |
| FORM | First Named Inventor | Hermann Sutter |
| | Art Unit | 3739 |
| (to be used for all correspondence after initial filing) | Examiner Name | Peter J. Vrettakos |
| Total Number of Pages in This Submission | Attorney Docket Number | SMB-PT081 (P 03 269 M US) |
| | NCLOSURES (Check all | that annivi |
| Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement | Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD emarks | After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): PTOL-85 |
| SIGNATUR | RE OF APPLICANT, ATTO | RNEY, OR AGENT |
| Firm Name | | |

Signature Printed name Randolph J. Huis Reg. No. Date 34,626 CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name Randolph J. Huis

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